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UTILITY PATENT APPLICATION TRANSMITTAL <small>(for new nonprovisional applications under 37 CFR § 1.53(b))</small>	Attorney Docket No.	4002-2643
	First Inventor	Hai H. Trieu
	Title	INTERVERTEBRAL DISC NUCLEUS IMPLANTS AND METHODS
	Express Mail Label No.	EL 271152035US

JC828 U.S. PTO
09/14/4441

08/30/01

APPLICATION ELEMENTSSee MPEP chapter 600 concerning utility patent application contents

1. *Fee Transmittal Form (e.g., PTO/SB/17)
(submit an original and a duplicate for fee processing)

2. Applicant claims small entity status.

3. Specification [Total Pages 54]
(preferred arrangement set forth below)

- Descriptive title of the Invention
- Cross References to Related Applications
- Statement Regarding Fed sponsored R & D
- Reference sequence listing, a table, or a computer program listing appendix or computer program listing appendix
- Background of the Invention
- Brief Summary of the Invention
- Brief Description of the Drawings (if filed)
- Detailed Description
- Claim(s)
- Abstract of the Disclosure

4. Drawing(s) (35 U.S.C. 113) [Total Sheets 26]
 Informal Formal [Total Pages 3]

5. Oath or Declaration

6. Application Data Sheet. See 37 CFR 1.76

Assistant Commissioner for Patents
ADDRESS TO:
Box Patent Application
Washington, DC 20231

7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)

8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)

- a Computer Readable Form (CRF)
- b Specification Sequence Listing on:
 - CD-ROM or CD-R (2 copies), or
 - paper
- c Statements verifying identity of above copies

ACCOMPANYING APPLICATION PARTS

9. Assignment Papers (cover sheet & document(s))

10. 37 C F R § 3 73(b) Statement (*when there is an assignee*) Power of Attorney

11. English Translation Document (if applicable)

12. Information Disclosure Statement (IDS)/PTO-1449 Copies of IDS Citations

13. Preliminary Amendment

14. Return Receipt Postcard (MPEP 503) (Should be specifically itemized)

15. Certified Copy of Priority Document(s) (if foreign priority is claimed)

16. Nonpublication Request under 35 U.S.C 122(b)(2)(B)(i) Applicant must attach form PTO/SB/35 or its equivalent.

17. Other: _____

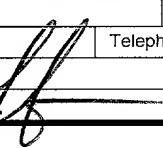
18. If a **CONTINUING APPLICATION**, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

Continuation Divisional Continuation-in-part (CIP) of prior application No: 09/650,525 filed 8/30/00
 Prior application information: Examiner: Not Yet Known Group / Art Unit: 3738

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

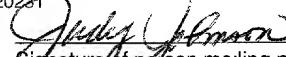
19. CORRESPONDENCE ADDRESS

Customer Number or Bar Code Label XXXXXXXXXX or Correspondence address below
(Insert Customer No. or Attach bar code label here)

Name	Jason J Schwartz, Reg. No. 43,910 Woodard, Emhardt, Naughton, Moriarty and McNett					
Address	Bank One Center/Tower 111 Monument Circle, Suite 3700					
City	Indianapolis	State	IN	Zip Code	46204-5137	
Country	USA	Telephone	(317) 634-3456	Fax	(317) 637-7561	
Name (Print/Type)	Jason J. Schwartz			Registration No (Attorney/Agent)	43,910	
Signature				Date	August 30, 2001	

Express Mail Label Number EL 271152035US**Date of Deposit August 30, 2001**

I hereby certify that this paper is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR Section 1.10 on the date indicated above and is addressed to the Assistant Commissioner for Patents, Washington DC 20231



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FEE TRANSMITTAL FOR FY 2001

Patent fees are subject to annual revision

Complete if Known

Application Number	
Filing Date August 30, 2001	
First Named Inventor Hai H. Trieu	
Group Art Unit	
Examiner Name	

Total Amount of Payment	(\$2,018)	Attorney Docket Number	4002-2643
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METHOD OF PAYMENT

1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any over payments to 23-3030	3. ADDITIONAL FEES		
Deposit Account Number	Large Fee Code	Entity Fee (\$)	Small Fee Code
Deposit Account Name	105	130	205
	127	50	227
	139	130	139
	147	2,520	147
	112	920*	112
	113	1,840*	113
	115	110	215
	116	390	216
	117	890	217
	118	1,390	218
	128	1,890	228
	119	310	219
	120	310	220
	121	270	221
	138	1,510	138
	140	110	240
	141	1,240	241
	142	1,240	242
	143	440	243
	144	600	244
	122	130	122
	123	50	123
	126	180	126
	581	40	581
	146	710	246
	149	710	249
	179	710	279
	169	900	169
	Other Fee (specify)		

FEE CALCULATION

1. BASIC FILING FEE					
Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid
101	710	201	355	Utility Filing Fee	710
106	320	206	160	Design Filing Fee	
107	490	207	245	Plant Filing Fee	
108	710	208	355	Reissue Filing Fee	
114	150	214	75	Provisional Filing Fee	
				SUBTOTAL (1)	(\$ 710)
2. EXTRA CLAIM FEES					
Total Claims	46	-20** =	26	X 18	= 468
Independent Claims	13	-3** =	10	X 80	= 800
Multiple Dependent					=
Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	
103	18	203	9	Claims in excess of 20	
102	80	202	40	Independent claims in excess of 3	
104	270	204	135	Multiple dependent claim, if not paid	
109	80	209	40	**Reissue independent claims over original patent	
110	18	210	9	**Reissue claims in excess of 20 and over original patent	
				SUBTOTAL (2)	(\$ 1268)

**or number previously paid, if greater. For Reissues, see above

* Reduced by Basic Filing Fee Paid

SUBTOTAL (3) **(\$ 40)**

SUBMITTED BY		Complete (if applicable)		
Name (Print/Type)	Jason J. Schwartz	Registration No (Attorney/Agent)	43,910	Telephone (317) 634-3456
Signature			Date	August 30, 2001

Warning: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038 DNK-1998-047-PA-CIP:JJS:140391:jj

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U S Patent and Trademark Office, Washington, DC 20231 DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS SEND TO: Assistant Commissioner for Patents, Washington, DC 202031